

DEAN HELLER  
 Secretary of State  
 206 North Carson Street  
 Carson City, Nevada 89701-4299  
 (775) 884 5708  
 Website: [secretaryofstate.biz](http://secretaryofstate.biz)

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 In the office of  
*Dean Heller*

Dean Heller  
 Secretary of State

ABOVE

**Articles Of Organization  
 Limited-Liability Company  
 (PURSUANT TO NRS 88)**

<b>1. Name of Limited-Liability Company</b> <b>AVON CAPITAL, LLC</b>		<input type="checkbox"/> Check box if a Series Limited-Liability Company	
<b>2. Resident Agent Name and Street</b> <b>Address:</b> <i>(must be a Nevada address where service may be served)</i> <b>CSC SERVICES OF NEVADA, INC.</b> Name <b>100 EAST JOHN STREET</b> Physical Street Address		<b>CARSON CITY</b> City	<b>NEVADA 89706</b> Zip Code
<b>3. Dissolution Date:</b> <i>(OPTIONAL-see instructions)</i> Latest date upon which the company is to dissolve (if existence is not perpetual):			
<b>4. Management:</b> <i>(check one)</i> Company shall be managed by		<input type="checkbox"/> Manager(s)	<input checked="" type="checkbox"/> Members
<b>5. Names, Addresses, of Manager(s) or Members;</b> <i>(list additional persons as necessary)</i> <b>GRISTMILL CAPITAL, LLC</b> Name <b>100 GRIST MILL ROAD</b> Address		<b>SIMBURY</b> City	<b>CT 06070</b> State Zip Code
Name Address		City	State Zip Code
Name Address		City	State Zip Code
<b>6. Names, Addresses and Signatures of Organizers</b> <i>(if more than one, attach additional page)</i> <b>CSC SERVICES OF NEVADA, INC.</b> Name <b>502 EAST JOHN STREET</b> Address		<i>Norma Heller</i> Signature	
<b>7. Certificate of Acceptance of Appointment of Resident Agent:</b> I hereby accept appointment as Resident Agent for the above named limited-liability company. <i>Norma Heller</i> Authorized Signature of R.A. or On Behalf of R.A. Company		Date <b>6/6/06</b>	

*This form must be accompanied by appropriate fees.*

Nevada Secretary of State Form LLC AN 16-2005  
 Revised on 12/10/06

**Reset**